

Office of Health Equity Advisory Committee Meeting
Public Comment Section
May 13, 2015

Motion: February 3, 2015, Meeting Minutes
Public Comment – Section 1.

PETE LAFOLLETTE

It's Pete Lafollette. I'm an MHSA stakeholder. Who I am is not so important as I represent people that don't speak for themselves or cannot. The minutes -- I'd like to really compliment the Office of Health Equity for the accuracy of minutes because, for me, that represents positive engagement and that represents a reform and progress.

The Mental Health Services Act constituents not only need to come to the table, they are the table. They are the origination of the Mental Health Services Act itself, which currently -- which ninety percent of the funds are not going out for the underserved and the needy. The Services Act is under occupation at this point. The broader picture, which I believe we all are here for, although that's a pretty -- that's a pretty big picture, with everything -- all the dissonance, all the problems that we're seeing in the world, we really need to gain strength through overcoming the adversity that we see.

And I truly believe that our -- our spiritual practices, our meditation, our -- our way of doing this will bring us to that broader picture that I'm talking about - that reformative progress for all, not just for -- not for putting out fires, but, again, sweeping progress and movements, which I -- which you are representing here and now for. So, thank you, and with that in the spirit of this occasion.

Motion: Bylaws #1
Public Comment – Section 2.
(No public comment)

Motion: Bylaws #2
Public Comment – Section 3.
(No public comment)

9:30 a.m. OHE Advisory Committee Election(s)
Public Comment – Section 4.
(No public comment)

10:00 a.m. CDPH and OHE Updates
Public Comment – Section 5.

PETE LAFOLLETTE

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I'm so excited to hear what you're talking about today, because I've seen so many broad failures that -- you know, I don't come to Sacramento for a hotel experience. It's nice to be put up, but I'm -- I'm here for tangibles. And I think you have every opportunity for real tangibles, because good will exports good outcomes.

I would suggest for this whole process that you all visualize implementing these outcomes as if they're living and in motion. I would like to see the Committee increase their continuity. I would like to see you grab the broadest opportunity which exists for ongoing roundtable discussions, because meeting twice yearly, as we know, just doesn't quite cut it.

And also, I know that you all have no problem that I have with self-expression. (Laughter.) I would like you to consider regular phone conferences with the Advisory Committee, with each other, and expanding upon the broader cross-sectoral member outcome that Jahmal is talking about.

And, above and beyond that, to include agencies that always have been in the forefront. Agencies like REMHDCO. People like Marina from the Department of Public Health. People like Jane -- Jane Adcock from Community Health Planning Council; Toby Ewing, of course; California Stakeholder Process Coalition; Mental Health America in San Francisco. These people have always been in the forefront of progress, and they -- they're not like one voice in the wilderness, which I've felt like I have been for so long, to be, you know, conveniently walked over to the next agenda item.

There are broad people here that are following these issues that know every bit as much, if not more, because they're on the inside. So, I hope you can at least give some thought to these -- these broader components being put in place.

11:00 a.m. The Raising of America Documentary Series – Early Childhood and Family Supports
Public Comment – Section 6.

PETE LAFOLLETTE

Equally as compelling and related to this film, but it didn't get addressed, is the killing of young, black adults under police and under the crimes of -- the color of authority. Usually, it's socioeconomically sourced, but it -- it demonstrates the -- the broad need for policy change that -- that was just discussed.

Along with the -- the need for reform of the Mental Health Services Act, the contract language -- two contracts - prevention and early intervention, as originally written - is -- is now being rewritten by the oversight and accountability office. And that's not -- that contributes to the ongoing crisis in mental health, which has tragic and costly consequences in our society, including many suicides, an appalling number of people with mental illness who are homeless, in jails, prisons, hospitalization, seeking

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care in -- in overburdened emergency. How that is related is -- is because their illnesses now will not be recognized as -- as proactive, but will be treated in a retroactive way.

The recent state audit and the Little Hoover findings -- two Little Hoover findings documented how funds are not reaching the most seriously ill. Principle parties set out to generate these success story statistics by serving only five percent of mental health clients and only new clients and new programs. The calculated purpose of this excludes all underserved clients in the existing system and it is done to generate these deceptive statistics, which are an irrelevant and cruel insult to consumers and their families and friends suffering the tragedy of untreated mental illness and it has all those bad byproducts that I just spoke about.

So, we support -- this is -- this is the stakeholder culture - we support keeping the contract language as originally written and designed for the Mental Health Services Act. With the increase in frequent school shootings, which is another -- another big pathology that's happening, it is vital that mental illness is recognized and treated at early stages and not as a retroactive disease after a -- a catastrophic incident. Thanks again for your time.

LONNIE RUSSELL

My name is Lonnie Russell, and I'm a mental health advocate and an activist in the African American community. And, first of all, I want to tell you I really appreciate this film. You know, a lot of people get information confused with education, and education is very important because to just give anybody in the community information, you have to also consider whether or not individuals can discern whether or not -- or how to -- or how it relates to their lives.

Secondly, I want to say that it's not just a system and policy issue that needs to be changed, but it is a question of -- of what we value as a society in all families. So, sometimes, policies are meant to prevent changes. So -- and a lot of it has to do with who is at the table when it comes to setting those policies, because very often I know that people of color, certainly African Americans, are not at the policy table. So, it's about all of our communities.

And also, I want to say this film -- there is a -- a lot of attention given now to the black child deaths, which has been epidemic proportions for forty years that we know of, but it has not been a priority by anyone. And, for a long time, the question I asked myself is, if we have all these policies in place to protect our communities and all children, then why has it taken this long to bring those who control resources together to look at doing something about it?

So, it's about time. (Laughter.) And it is about all of our children, but we really do need to look at who is the most disadvantaged and start there. And, lastly, in terms of the film as it relates to education, there is a big push now to work with -- within the

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African American community because of the crisis -- the now-known crisis -- or recognized crisis of black infant death in Sacramento, but it's nationally.

This film, I think, can also be used in -- some parts of it anyway. I'd have to look at the whole film to look at how, you know, it could be used as maybe a tool to help them with the education in the community.

And, lastly, one of the things I think that everybody needs to consider is the historical trauma that many of these children experience. It's not just the trauma in the -- the children, but the histories of the families. So, whenever there are assessment tools that are developed, to look at what needs to -- what services need to -- what new services need to look like, how do -- and look at what we have done that haven't worked for all families.

Those assessment tools are very critical and it also needs to include the -- the psychosocial history of families. And so, I'm hoping that, as you move forward as a Board, that that will be considered. So, that's all. Thank you.

1:00 p.m. Small Group Session #1

Public Comment – Section 7.

(No public comment)

1:45 p.m. Small Group Session #2

Public Comment – Section 8.

(No public comment)

2:40 p.m. Small Groups Report Out

Public Comment – Section 9.

SHENÉ BOWIE

Hi, yes. My name is Shené Bowie. I just wanted to find out, in terms of partnerships with work that has already been done around health equity, specifically within the department of CDPH in the NEOP branch - the Nutrition Education and Obesity Prevention branch.

They had a health equity advisory committee that is being -- or has been dismantled due to funding, and I just wanted to find out if there were any partnership efforts being put forth in that area. And that specifically addresses nutrition and physical activity. I heard Jahmal mention, like, sugar-sweetened beverages. Those are things that we addressed for many years, so I just want to find out if there's any partnership efforts with the NEOP department.

And then, in terms of policy, are there any efforts with partnerships with statewide agencies and partnerships that are already working on policies related to community advocacy and trying to bring the issues from the community up through -- to the states, specifically California Convergence, the Center for Public Health Advocacy, and a lot of

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other statewide advocacy groups that are doing a lot of this work that you've mentioned? Is there any partnership effort in that area? And then, youth - I hadn't heard anything mentioned about the health equities around youth, specifically. So, those are just three areas that I wanted to comment on.

RESPONSE FROM STAFF: Jahmal Miller stated several partnership discussions and efforts are underway. The OHE anticipates working with the California Endowment regarding youth, such as with the climate change focus group, CYPHER. He asked to discuss partnerships further with Ms. Bowie offline. Tamu Nolfo gave Ms. Bowie her contact information.

SHENÉ BOWIE

Yes, that's perfectly fine. I had been a part of the Advisory Council since probably '98, so it's important to me to see that the work continues, especially in an effort like the one that's going on now. I just want to make sure that what you're alluding to is reflected in the work of this council, only because it sounds like there are things being done in the background, and it would be nice to see it reflected in some of the discussions and then outcomes of the current group. I'm more than willing to assist in any area without being a member.

3:30 p.m. Planning for the September 29, 2015, Advisory Committee Meeting
Public Comment – Section 10.
(No public comment)

4:50 p.m. Debrief | Public Comment Period | Public Comment for Items Not on the Agenda
Public Comment – Section 11.

PETE LAFOLLETTE

Thank you. It's -- it's meant very much for me to participate in this today. I feel heard on -- on pressing issues and I feel that we all have resonance on these. Just a quick couple of items of education.

If you Google "new regs proposed to drive mental health services funds away from people," you're -- you'll learn more about the rewriting of those two contracts I was talking about. Also, if you look on the Internet, www.californiagovernment.org, to get a copy of the transitional plan, which calls to transfer of all community health programs - page seven talks about creating a data management unit. Data management is, of course, one of the big, pressing items.

The overall problems that we examined that -- and talked about today and we experience every day, which I referred to earlier, just the general sort of mayhem and dissonance that we're seeing in -- in societal movement, these problems in the greater

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community are also problems within the self, calling us to become more tolerant, calling us to engage more, calling us to -- to transform personal as well as social.

It is time to affirm that we, as a relationship with the greater good, are all cut from the same fabric. And we owe it to ourselves and the larger community to live positive and meaningful lives, as we are marking time here the best we can before we ascend to another incarnation and another experience.

So, in those parting words, again, thank you for your dedication to these -- these issues.